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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) 003254-10

CERTIFICATE OF MAILING OR TRANSMISSION
[37 CFR 1.8(a)]

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 703-872-9306, on February 8, 2005.

Signature: Kathleen M. McManus

Name: Kathleen M. McManus

In re Application of Michael antreich	
Application Number 10/679,286	Filed 10-07-2003
For STOWAGE SPACE COVER OF A CONVRTIBLE	
Group Art Unit 3612	Examiner Hilary L. Gutman

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows (check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) - ($60/$120) $_____
- ☒ Two months (37 CFR 1.17(a)(2)) - ($225/$450) $450.00
- ☐ Three months (37 CFR 1.17(a)(3)) - ($510/$1020) $_____
- ☐ Four months (37 CFR 1.17(a)(4)) - ($795/$1590) $_____
- ☐ Five months (37 CFR 1.17(a)(5)) - ($1080/$2160) $_____

☐ Applicant claims small entity status.

☐ A check to cover the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380(003254-10). I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.

Signature	February 8, 2005
	Date
David S. Safran	703-827-8094
Typed or printed name	Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

SEND TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

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